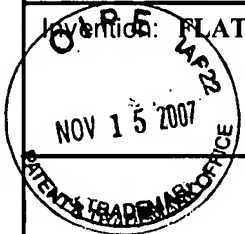


AF

AMENDMENT TRANSMITTAL LETTER (Small Entity)				Docket No. WSP219US																																					
Applicant(s): WEISBRODT et al.																																									
Application No. 10/696,840	Filing Date 10/30/2003	Examiner Alison K. Pickard	Customer No. 24041	Group Art Unit 3673	Confirmation No. 9134																																				
<div style="float: left; width: 150px; text-align: center;">  </div> <div style="float: right; width: 800px;"> <p>INVENTION: FLAT SEALING RING</p> <p style="text-align: center;"><u>COMMISSIONER FOR PATENTS:</u></p> <p>Transmitted herewith is an amendment in the above-identified application.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> <p>The fee has been calculated and is transmitted as shown below.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="6" style="text-align: center;">CLAIMS AS AMENDED</th> </tr> <tr> <th></th> <th style="text-align: center;">CLAIMS REMAINING AFTER AMENDMENT</th> <th style="text-align: center;">HIGHEST # PREV. PAID FOR</th> <th style="text-align: center;">NUMBER EXTRA CLAIMS PRESENT</th> <th style="text-align: center;">RATE</th> <th style="text-align: center;">ADDITIONAL FEE</th> </tr> <tr> <td>TOTAL CLAIMS</td> <td style="text-align: center;">14 -</td> <td style="text-align: center;">20 =</td> <td style="text-align: center;">0</td> <td style="text-align: center;">x \$25.00</td> <td style="text-align: center;">\$0.00</td> </tr> <tr> <td>INDEP. CLAIMS</td> <td style="text-align: center;">3 -</td> <td style="text-align: center;">3 =</td> <td style="text-align: center;">0</td> <td style="text-align: center;">x \$100.00</td> <td style="text-align: center;">\$0.00</td> </tr> <tr> <td colspan="5">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> <td style="text-align: center;">\$0.00</td> </tr> <tr> <td colspan="5" style="text-align: right;">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</td> <td style="text-align: center;">\$0.00</td> </tr> </table> <p> <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0822 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. </p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>/C. Paul Maliszewski/</p> <p style="text-align: center;"><i>Signature</i></p> <p>C. Paul Maliszewski Registration No. 51,990 Simpson & Simpson, PLLC 5555 Main Street Williamsville, NY 14221-5406 Telephone No. 716-626-1564 Facsimile No. 716-626-0366</p> <p>CPM/KRB cc:</p> </div> <div style="width: 45%;"> <p>Dated: November 13, 2007</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on Nov. 13, 2007 _____ (Date)</p> <p style="text-align: center;">/C. Paul Maliszewski/</p> <p style="text-align: center;"><i>Signature of Person Mailing Correspondence</i></p> <p style="text-align: center;">C. Paul Maliszewski</p> <p style="text-align: center;"><i>Typed or Printed Name of Person Mailing Correspondence</i></p> </div> </div> </div> </div>						CLAIMS AS AMENDED							CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	TOTAL CLAIMS	14 -	20 =	0	x \$25.00	\$0.00	INDEP. CLAIMS	3 -	3 =	0	x \$100.00	\$0.00	Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
CLAIMS AS AMENDED																																									
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE																																				
TOTAL CLAIMS	14 -	20 =	0	x \$25.00	\$0.00																																				
INDEP. CLAIMS	3 -	3 =	0	x \$100.00	\$0.00																																				
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00																																				
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00																																				